

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011
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1.0	PHA Information PHA Name: <u>The West Palm Beach Housing Authority</u> PHA Code: <u>FL009</u> PHA Type: <input type="checkbox"/> Small <input type="checkbox"/> High Performing <input checked="" type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>04/01/2011</u>					
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>648</u> Number of HCV units: <u>3039</u>					
3.0	Submission Type <input type="checkbox"/> 5-Year and Annual Plan <input checked="" type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only					
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)					
	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program	
	PHA 1:				PH	HCV
	PHA 2:					
	PHA 3:					
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.					
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To provide safe, decent and affordable housing to persons and families with limited financial resources and to provide residents with access to programs which will assist them in making the transition to greater financial security					

5.2	<p>Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. For Progress Report see attachment FL009a01</p> <p>Goal: Manage the West Palm Beach Housing Authority's existing housing stock in an efficient and effective manner and seek to expand the stock of affordable housing in West Palm Beach:</p> <p>Objectives:</p> <ol style="list-style-type: none"> (1) The West Palm Beach Housing Authority will maintain its vacancy rate at no more than 2% (2) The West Palm Beach Housing Authority will continue to decrease the number of days for unit turnaround to less than 10 days. (3) The West Palm Beach Housing Authority will improve and re-emphasize policies and procedures for resident orientation. (4) The West Palm Beach Housing Authority will strive to eliminate pest infestations in all developments. (5) The West Palm Beach Housing Authority shall maintain Section 8 lease up at 100%. (6) The West Palm Beach Housing Authority shall increase its score to reach high performer status. (7) The West Palm Beach Housing Authority will increase the percentage of rents collected to 99% or more. (8) The West Palm Beach Housing Authority will contemplate purchases of expiring use buildings as well as other viable real estate options. (9) Acquire existing properties and land for subsequent development (10) Revitalize the Dunbar Village and Southridge by Hope VI Revitalization and/or Demolition grants or by any other means possible. (11) The West Palm Beach Housing Authority will pursue opportunities to partner with the City of West Palm Beach, Housing Partnership, private developers and other viable housing development entities. (12) Pursue the development of a continuum of care for independent living to assisted living, adult day services, and other programs that may include multi-generational housing. (13) Establish commercial/Retail ventures along Tamarind Avenue. (14) Develop Paul Lawrence Dunbar Senior Complex in Dunbar Village. (15) Rehabilitate /Construct a Twin Lakes Community Center and Training Facility. (16) Apply for any and all local, State and Federal funding opportunities including LIHTC, NSP, and CRA financing. <p>Goal: Improve community quality of life and economic viability.</p> <p>Objectives:</p> <ol style="list-style-type: none"> (1) The West Palm Beach Housing Authority shall achieve a level of customer satisfaction that gives the agency the highest score possible in this element of the Public Housing Assessment System, specifically in the areas of Safety, Communication and Neighborhood appearance. (2) The West Palm Beach Housing Authority shall continue to remove all graffiti within 24 hours of discovering it. (3) The West Palm Beach Housing Authority shall achieve proper curb appeal for all of its public housing development through landscaping, lawn maintenance, trash pick-up and other means. (4) The West Palm Beach Housing Authority shall create an appealing, up-to-date environment in its developments. (5) The West Palm Beach Housing Authority shall continue to use its Deconcentration policies in an effort to mix its public housing development populations as much as possible with respect to ethnicity, race and income. (6) The West Palm Beach Housing Authority will pursue plans to implement mixed finance/mixed income housing developments using public/private collaborations. (7) To emphasize quality of life issues for WPBHA elderly residents by improving social services and health care on-site. (8) Partner with the City for Vickers House South to secure provision of services in the Southern area. (9) Create Economic Initiatives, Department of Financial Services to include a Bank and an IDA (Individual Development Account) (10) Establish revenue streams by offering contracted services to a public and private sector customer base. (11) The WPBHA will pursue Green housing opportunities for both existing units and for new construction including sustainable irrigation systems. <p>Goal: Provide a safe and secure environment in the West Palm Beach Housing Authority's public housing developments.</p> <p>Objectives:</p> <ol style="list-style-type: none"> (1) The West Palm Beach Housing Authority shall continue to evaluate all developments using second generation Crime Prevention through Environmental Design criteria and implement the recommendations. (2) The West Palm Beach Housing Authority continues to reduce crime in its developments. (3) The West Palm Beach Housing Authority shall develop more youth activities by partnering with existing social service agencies. (4) The West Palm Beach Housing Authority shall refine the memorandum of understanding between the jurisdiction's police force and this agency in order to develop strategies for identifying and reducing crime and in order to reduce police response time, and will provide to the greatest extent possible security in all developments. (5) The West Palm Beach Housing Authority shall reduce its evictions due to violation of criminal laws by 50% by December 31, 2011, by implementing aggressive screening procedures. <p>Goal: Promote self-sufficiency and asset development of families and individuals.</p> <p>Objectives:</p> <ol style="list-style-type: none"> (1) The West Palm Beach Housing Authority shall, continue working with its partners, to ensure that to the greatest extent possible that residents are working or engaged in job training. (2) Continue the successful Section 8 Homeownership Program <p>Goal: Reduce dependency on federal funding.</p> <p>Objectives:</p> <ol style="list-style-type: none"> (1) The West Palm Beach Housing Authority shall operate so that income exceeds expenses every year. (2) Diversify existing public housing portfolio and develop funding alternatives (3) Re-brand agency as developer/provider of affordable housing.
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6.0	<p>PHA Plan Update</p> <p>(a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission:</p> <p style="text-align: center;">(1) PHA Plan Elements 1, and 2</p> <p>(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. - 171 5 Division Avenue, West Palm Beach, Florida 33407</p>
7.0	<p>Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i></p> <ul style="list-style-type: none"> • Mixed Finance: The WPBHA will pursue mixed finance developments in Dunbar Village and Southridge • Acquisition: The WPBHA will also pursue options for acquisition. • Modernization or Development: Plans for modernization are identified in the WPBHA Capital Fund Program Annual Statement • Demolition and/or Disposition: The WPBHA plans to pursue demolition in Dunbar Village. The WPBHA also plans to dispose of units in Pleasant City with a one for one replacement value with the City of West Palm Beach. • Relocation Funds. The WPBHA plans to apply for Relocation funds in the next fiscal year. • Conversion of Public Housing – The WPBHA plans to undertake voluntary conversion to project-based assistance for Twin Lakes and Southridge. • Homeownership: The WPBHA presently administers the Family Self-Sufficiency (FSS) Homeownership programs for Section 8 and Public Housing and the Section 8 Homeownership Program. There are currently 192 families participating in the FSS Program (Section 8 – 173, Public Housing- 19). The Section 8 Homeownership was implemented in 2008, and a maximum of 110 vouchers have been assigned to the program. The WPBHA will continue to develop homeownership opportunities in Merry Place and Colony Oaks and will pursue options for acquisition of additional affordable housing. • RHF – The WPBHA will build 9 units of public housing with RHF funds • The WPBHA will apply for an allocation of Low Income Tax Credits for affordable housing development.
8.0	<p>Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.</p>
8.1	<p>Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i>, form HUD-50075.1, for each current and open CFP grant and CFFP financing. See Attachment FL009b01</p>
8.2	<p>Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i>, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See Attachment FL009c01</p>
8.3	<p>Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.</p>
9.0	<p>Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. See Attachment FL009k01</p>

9.1	<p>Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan.</p> <ul style="list-style-type: none"> • SECTION 8 - The Section 8 Waiting list was last opened in 2002 which resulted in 6,000 people being placed on the Waiting List. The WPBHA has been providing Section 8 assistance from this Waiting List over the years and currently has 413 individuals waiting for assistance. The WPBHA plans to open its Waiting List in February 2011. • PUBLIC HOUSING – The Public Housing Waiting was last opened in May 2008, and has 672 people on this list waiting for assistance. This list is currently closed.
10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The West Palm Beach Housing Authority will consider the following changes to its Annual and 5-year plan to be "significant".</p> <ul style="list-style-type: none"> ➤ Any Change required by amendment in federal statutes, regulations or HUD notices that in the opinion of the West Palm Beach Housing Authority (WPBHA) has either substantial programmatic or financial or administrative burdens beyond the programs under administration at the start of the Plan Year. ➤ Any change that the WPBHA Board determines to be significant. ➤ Any additional plans for demolition of any housing owned or managed by the WPBHA.
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, <i>PHA Certifications of Compliance with the PHA Plans and Related Regulations</i> (which includes all certifications relating to Civil Rights) . See Attachment FL009d01, Attachment FL009e01, and Attachment FL009j01</p> <p>(b) Form HUD-50070, <i>Certification for a Drug-Free Workplace</i> (PHAs receiving CFP grants only) See Attachment FL009f01</p> <p>(c) Form HUD-50071, <i>Certification of Payments to Influence Federal Transactions</i> (PHAs receiving CFP grants only) See Attachment FL009g01</p> <p>(d) Form SF-LLL, <i>Disclosure of Lobbying Activities</i> (PHAs receiving CFP grants only) See Attachment FL009h01</p> <p>(e) Form SF-LLL-A, <i>Disclosure of Lobbying Activities Continuation Sheet</i> (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations. See Attachment FL009i01</p> <p>(g) Challenged Elements – None</p> <p>(h) Form HUD-50075.1, <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> (PHAs receiving CFP grants only) See Attachment FL009b01</p> <p>(i) Form HUD-50075.2, <i>Capital Fund Program Five-Year Action Plan</i> (PHAs receiving CFP grants only) See Attachment FL009c01</p>

This information collection is authorized by Section 511 of the Quality Housing and Work Responsibility Act, which added a new section 5A to the U.S. Housing Act of 1937, as amended, which introduced 5-Year and Annual PHA Plans. The 5-Year and Annual PHA plans provide a ready source for interested parties to locate basic PHA policies, rules, and requirements concerning the PHA's operations, programs, and services, and informs HUD, families served by the PHA, and members of the public of the PHA's mission and strategies for serving the needs of low-income and very low-income families. This form is to be used by all PHA types for submission of the 5-Year and Annual Plans to HUD. Public reporting burden for this information collection is estimated to average 12.68 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. HUD may not collect this information, and respondents are not required to complete this form, unless it displays a currently valid OMB Control Number.

Privacy Act Notice. The United States Department of Housing and Urban Development is authorized to solicit the information requested in this form by virtue of Title 12, U.S. Code, Section 1701 et seq., and regulations promulgated thereunder at Title 12, Code of Federal Regulations. Responses to the collection of information are required to obtain a benefit or to retain a benefit. The information requested does not lend itself to confidentiality

Instructions form HUD-50075

Applicability. This form is to be used by all Public Housing Agencies (PHAs) with Fiscal Year beginning April 1, 2008 for the submission of their 5-Year and Annual Plan in accordance with 24 CFR Part 903. The previous version may be used only through April 30, 2008.

1.0 PHA Information

Include the full PHA name, PHA code, PHA type, and PHA Fiscal Year Beginning (MM/YYYY).

2.0 Inventory

Under each program, enter the number of Annual Contributions Contract (ACC) Public Housing (PH) and Section 8 units (HCV).

3.0 Submission Type

Indicate whether this submission is for an Annual and Five Year Plan, Annual Plan only, or 5-Year Plan only.

4.0 PHA Consortia

Check box if submitting a Joint PHA Plan and complete the table.

5.0 Five-Year Plan

Identify the PHA's Mission, Goals and/or Objectives (24 CFR 903.6). Complete only at 5-Year update.

5.1 Mission. A statement of the mission of the public housing agency for serving the needs of low-income, very low-income, and extremely low-income families in the jurisdiction of the PHA during the years covered under the plan.

5.2 Goals and Objectives. Identify quantifiable goals and objectives that will enable the PHA to serve the needs of low income, very low-income, and extremely low-income families.

6.0 PHA Plan Update. In addition to the items captured in the Plan template, PHAs must have the elements listed below readily available to the public. Additionally, a PHA must:

- (a) Identify specifically which plan elements have been revised since the PHA's prior plan submission.
- (b) Identify where the 5-Year and Annual Plan may be obtained by the public. At a minimum, PHAs must post PHA Plans, including updates, at each Asset Management Project (AMP) and main office or central office of the PHA. PHAs are strongly encouraged to post complete PHA Plans on its official website. PHAs are also encouraged to provide each resident council a copy of its 5-Year and Annual Plan.

PHA Plan Elements. (24 CFR 903.7)

1. **Eligibility, Selection and Admissions Policies, including Deconcentration and Wait List Procedures.** Describe the PHA's policies that govern resident or tenant eligibility, selection and admission including admission preferences for both public housing and HCV and unit assignment policies for public housing; and procedures for maintaining waiting lists for admission to public housing and address any site-based waiting lists.

2. **Financial Resources.** A statement of financial resources, including a listing by general categories, of the PHA's anticipated resources, such as PHA Operating, Capital and other anticipated Federal resources available to the PHA, as well as tenant rents and other income available to support public housing or tenant-based assistance. The statement also should include the non-Federal sources of funds supporting each Federal program, and state the planned use for the resources.

3. **Rent Determination.** A statement of the policies of the PHA governing rents charged for public housing and HCV dwelling units.

4. **Operation and Management.** A statement of the rules, standards, and policies of the PHA governing maintenance management of housing owned, assisted, or operated by the public housing agency (which shall include measures necessary for the prevention or eradication of pest infestation, including cockroaches), and management of the PHA and programs of the PHA.

5. **Grievance Procedures.** A description of the grievance and informal hearing and review procedures that the PHA makes available to its residents and applicants.

6. **Designated Housing for Elderly and Disabled Families.** With respect to public housing projects owned, assisted, or operated by the PHA, describe any projects (or portions thereof), in the upcoming fiscal year, that the PHA has designated or will apply for designation for occupancy by elderly and disabled families. The description shall include the following information: **1)** development name and number; **2)** designation type; **3)** application status; **4)** date the designation was approved, submitted, or planned for submission, and; **5)** the number of units affected.

7. **Community Service and Self-Sufficiency.** A description of: **(1)** Any programs relating to services and amenities provided or offered to assisted families; **(2)** Any policies or programs of the PHA for the enhancement of the economic and social self-sufficiency of assisted families, including programs under Section 3 and FSS; **(3)** How the PHA will comply with the requirements of community service and treatment of income changes resulting from welfare program requirements. **(Note: applies to only public housing).**

8. **Safety and Crime Prevention.** For public housing only, describe the PHA's plan for safety and crime prevention to ensure the safety of the public housing residents. The statement must include: (i) A description of the need for measures to ensure the safety of public housing residents; (ii) A description of any crime prevention activities conducted or to be conducted by the PHA; and (iii) A description of the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities.

9. **Pets.** A statement describing the PHAs policies and requirements pertaining to the ownership of pets in public housing.

10. **Civil Rights Certification.** A PHA will be considered in compliance with the Civil Rights and AFFH Certification if: it can document that it examines its programs and proposed programs to identify any impediments to fair housing choice within those programs; addresses those impediments in a reasonable fashion in view of the resources available; works with the local jurisdiction to implement any of the jurisdiction's initiatives to affirmatively further fair housing; and assures that the annual plan is consistent with any applicable Consolidated Plan for its jurisdiction.

11. **Fiscal Year Audit.** The results of the most recent fiscal year audit for the PHA.

12. **Asset Management.** A statement of how the agency will carry out its asset management functions with respect to the public housing inventory of the agency, including how the agency will plan for the long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs for such inventory.

13. **Violence Against Women Act (VAWA).** A description of: 1) Any activities, services, or programs provided or offered by an agency, either directly or in partnership with other service providers, to child or adult victims of domestic violence, dating violence, sexual assault, or stalking; 2) Any activities, services, or programs provided or offered by a PHA that helps child and adult victims of domestic violence, dating violence, sexual assault, or stalking, to obtain or maintain housing; and 3) Any activities, services, or programs provided or offered by a public housing agency to prevent domestic violence, dating violence, sexual assault, and stalking, or to enhance victim safety in assisted families.

7.0 Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers

(a) **Hope VI or Mixed Finance Modernization or Development.** 1) A description of any housing (including project number (if known) and unit count) for which the PHA will apply for HOPE VI or Mixed Finance Modernization or Development; and 2) A timetable for the submission of applications or proposals. The application and approval process for Hope VI, Mixed Finance Modernization or Development, is a separate process. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/programs/ph/hope6/index.cfm>

(b) **Demolition and/or Disposition.** With respect to public housing projects owned by the PHA and subject to ACCs under the Act: (1) A description of any housing (including project number and unit numbers [or addresses]), and the number of affected units along with their sizes and accessibility features) for which the PHA will apply or is currently pending for demolition or disposition; and (2) A timetable for the demolition or disposition. The application and approval process for demolition and/or disposition is a separate process. See guidance on HUD's website at: http://www.hud.gov/offices/pih/centers/sac/demo_dispo/index.cfm

Note: This statement must be submitted to the extent that approved and/or pending demolition and/or disposition has changed.

(c) **Conversion of Public Housing.** With respect to public housing owned by a PHA: 1) A description of any building or buildings (including project number and unit count) that the PHA is required to convert to tenant-based assistance or

that the public housing agency plans to voluntarily convert; 2) An analysis of the projects or buildings required to be converted; and 3) A statement of the amount of assistance received under this chapter to be used for rental assistance or other housing assistance in connection with such conversion. See guidance on HUD's website at: <http://www.hud.gov/offices/pih/centers/sac/conversion.cfm>

(d) **Homeownership.** A description of any homeownership (including project number and unit count) administered by the agency or for which the PHA has applied or will apply for approval.

(e) **Project-based Vouchers.** If the PHA wishes to use the project-based voucher program, a statement of the projected number of project-based units and general locations and how project basing would be consistent with its PHA Plan.

8.0 **Capital Improvements.** This section provides information on a PHA's Capital Fund Program. With respect to public housing projects owned, assisted, or operated by the public housing agency, a plan describing the capital improvements necessary to ensure long-term physical and social viability of the projects must be completed along with the required forms. Items identified in 8.1 through 8.3, must be signed where directed and transmitted electronically along with the PHA's Annual Plan submission.

8.1 **Capital Fund Program Annual Statement/Performance and Evaluation Report.** PHAs must complete the *Capital Fund Program Annual Statement/Performance and Evaluation Report* (form HUD-50075.1), for each Capital Fund Program (CFP) to be undertaken with the current year's CFP funds or with CFFP proceeds. Additionally, the form shall be used for the following purposes:

- (a) To submit the initial budget for a new grant or CFFP;
- (b) To report on the Performance and Evaluation Report progress on any open grants previously funded or CFFP; and
- (c) To record a budget revision on a previously approved open grant or CFFP, e.g., additions or deletions of work items, modification of budgeted amounts that have been undertaken since the submission of the last Annual Plan. The Capital Fund Program Annual Statement/Performance and Evaluation Report must be submitted annually.

Additionally, PHAs shall complete the Performance and Evaluation Report section (see footnote 2) of the *Capital Fund Program Annual Statement/Performance and Evaluation* (form HUD-50075.1), at the following times:

- 1. At the end of the program year; until the program is completed or all funds are expended;
- 2. When revisions to the Annual Statement are made, which do not require prior HUD approval, (e.g., expenditures for emergency work, revisions resulting from the PHAs application of fungibility); and
- 3. Upon completion or termination of the activities funded in a specific capital fund program year.

8.2 Capital Fund Program Five-Year Action Plan

PHAs must submit the *Capital Fund Program Five-Year Action Plan* (form HUD-50075.2) for the entire PHA portfolio for the first year of participation in the CFP and annual update thereafter to eliminate the previous year and to add a new fifth year (rolling basis) so that the form always covers the present five-year period beginning with the current year.

8.3 **Capital Fund Financing Program (CFFP).** Separate, written HUD approval is required if the PHA proposes to pledge any

portion of its CFP/RHF funds to repay debt incurred to finance capital improvements. The PHA must identify in its Annual and 5-year capital plans the amount of the annual payments required to service the debt. The PHA must also submit an annual statement detailing the use of the CFFP proceeds. See guidance on HUD's website at:

<http://www.hud.gov/offices/pih/programs/ph/capfund/cffp.cfm>

9.0 Housing Needs. Provide a statement of the housing needs of families residing in the jurisdiction served by the PHA and the means by which the PHA intends, to the maximum extent practicable, to address those needs. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

9.1 Strategy for Addressing Housing Needs. Provide a description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**

10.0 Additional Information. Describe the following, as well as any additional information requested by HUD:

- (a) **Progress in Meeting Mission and Goals.** PHAs must include (i) a statement of the PHAs progress in meeting the mission and goals described in the 5-Year Plan; (ii) the basic criteria the PHA will use for determining a significant amendment from its 5-year Plan; and a significant amendment or modification to its 5-Year Plan and Annual Plan. **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan).**
- (b) **Significant Amendment and Substantial Deviation/Modification.** PHA must provide the definition of "significant amendment" and "substantial deviation/modification". **(Note: Standard and Troubled PHAs complete annually; Small and High Performers complete only for Annual Plan submitted with the 5-Year Plan.)**

- (c) PHAs must include or reference any applicable memorandum of agreement with HUD or any plan to improve performance. **(Note: Standard and Troubled PHAs complete annually).**

11.0 Required Submission for HUD Field Office Review. In order to be a complete package, PHAs must submit items (a) through (g), with signature by mail or electronically with scanned signatures. Items (h) and (i) shall be submitted electronically as an attachment to the PHA Plan.

- (a) Form HUD-50077, *PHA Certifications of Compliance with the PHA Plans and Related Regulations*
- (b) Form HUD-50070, *Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)*
- (c) Form HUD-50071, *Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)*
- (d) Form SF-LLL, *Disclosure of Lobbying Activities (PHAs receiving CFP grants only)*
- (e) Form SF-LLL-A, *Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)*
- (f) Resident Advisory Board (RAB) comments.
- (g) Challenged Elements. Include any element(s) of the PHA Plan that is challenged.
- (h) Form HUD-50075.1, *Capital Fund Program Annual Statement/Performance and Evaluation Report (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.1.
- (i) Form HUD-50075.2, *Capital Fund Program Five-Year Action Plan (Must be attached electronically for PHAs receiving CFP grants only)*. See instructions in 8.2.

Statement of Progress

2010 Goals

Goal: Manage the West Palm Beach Housing Authority's existing housing stock in an efficient manner and seek to expand the stock of affordable housing in West Palm Beach.

The West Palm Beach Housing Authority's (WPBHA) vacancy rate, unit turnaround days and rent collections have all hit the desired targets, and staff continues to work hard to improve the "curb appeal" of each of our public housing developments. Unfortunately, the objective of 100% lease up in the HCV program fell to the reality of HAP appropriations. The WPBHA lowered its payment standard to 90% in an effort to serve as many families as possible, and was diligent in keeping rents as low as the market would allow. The WPBHA continues to maintain a 100% utilization rate, and assiduously applies for any increase in program capacity. We were disappointed not to receive any vouchers for non-elderly disabled, as there is an unanswered need for this assistance in West Palm Beach.

The WPBHA did not receive HOPE VI funding for Dunbar Village.

The ARRA formula funds received were used to rehabilitate nineteen buildings in Pleasant City. Hurricane resistant windows, tank less hot water heaters, energy efficient appliances and solid wood cabinets were installed. The WPBHA was successful in its competitive application for UFAS accessibility upgrades in its senior development. The maximum we could apply for was \$1,710,000 which was sufficient for 75 units. The upgrade includes ramps and new accessible routes from parking to unit, new kitchens, baths and tank less hot water heaters.

The WPBHA partnered with the City of West Palm Beach to develop new land use and zoning regulations along Tamarind Avenue. The WPBHA retains the right to build housing at the Multi Family 32 designation, but in addition can develop mixed use buildings and one acre has been designated commercial.

Goal: Improve community quality of life and economic viability.

The WPBHA removes all litter, graffiti and trash dumped by non-residents within 24 hours. Resident response is to generally keep areas in a more safe and sanitary condition. Regular housekeeping inspections and mandatory one-on-one educational exercises have reduced infestations dramatically. Vacancy turnover is easier and less costly.

The WPBHA, through its ROSS grant, offers adult career development in the upgraded computer lab located in Dunbar Village. Also, the WPBHA partnered with the City and the Palm Beach County School District to provide wireless internet access to residents in select areas of the city.

The WPBHA received a new round of funding from the Quantum Foundation to continue operations at our on- site Health and Fitness Center. Biggest Loser contests, chair exercises for seniors and the new additions of yoga and Karate for youth keep this one of the busiest places in our developments.

Goal: Provide a safe and secure environment in the West Palm Beach Housing Authority's public housing developments.

Security patrols continue. Security personnel work hard to keep residents and the premises from undesirable intruders and behavior. Resident's willingness to cooperate with law enforcement appears to be on the rise. Cooperation with the City Police Department has increased dramatically.

Vicker's House South, the City of West Palm Beach's family service center, is very active in providing services to WPBHA residents. The WPBHA is able to partner with the city in educational opportunities for seniors, summer camp for youth residing the public housing and emergency relief activities.

Goal: Promote self-sufficiency and asset development of families and individuals.

The WPBHA FSS program has taken full advantage of the collapsed real estate market to aid both public housing residents and HCV participants in finding a reasonably priced home. Eight (8) families have purchased homes this year; seven (7) have used escrow funds to pursue further education. The WPBHA also works closely with the Workforce Development Board; the WPBHA has provided full time employment to a participant in the Urban League's subrecipient training program. Both employer and employee are well pleased.

The WPBHA has taken the Section 3 requirements of its contracts to a new level. Through the efforts of the Section 3 Compliance Officer, the local workforce has benefited from the stimulus funding and the capital projects funds to an unprecedented degree.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Replacement Housing Factor Grant No: _____ Date of CFFP: _____			FFY of Grant: FFY of Grant Approval: _____
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no: _____) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: _____ <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)				
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name:		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: _____ FFY of Grant: _____ FFY of Grant Approval: _____	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director		Date	Signature of Public Housing Director		Date

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name:

[illegible]

Page 5 of 6

PHA Name:

[illegible]

Page 6 of 6

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/20011

Part I: Summary							
PHA Name/Number		Locality (City/County & State)				<input type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No: ¹
A.	Development Number and Name	Work Statement for Year 1 FFY _____	Work Statement for Year 2 FFY _____	Work Statement for Year 3 FFY _____	Work Statement for Year 4 FFY _____	Work Statement for Year 5 FFY _____	
B.	Physical Improvements Subtotal	Annual Statement					
C.	Management Improvements						
D.	PHA-Wide Non-dwelling Structures and Equipment						
E.	Administration						
F.	Other						
G.	Operations						
H.	Demolition						
I.	Development						
J.	Capital Fund Financing – Debt Service						
K.	Total CFP Funds						
L.	Total Non-CFP Funds						
M.	Grand Total						

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/20011

[illegible]

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/20011

Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year: _____ FFY _____		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual						
Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part II: Supporting Pages – Physical Needs Work Statement(s)							
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____			Work Statement for Year: _____ FFY _____			
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	
See Annual Statement							
		Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

Capital Fund Program—Five-Year Action Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/20011

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

Part III: Supporting Pages – Management Needs Work Statement(s)				
Work Statement for Year 1 FFY _____	Work Statement for Year _____ FFY _____		Work Statement for Year: _____ FFY _____	
	Development Number/Name General Description of Major Work Categories	Estimated Cost	Development Number/Name General Description of Major Work Categories	Estimated Cost
See				
Annual				
Statement				
	Subtotal of Estimated Cost	\$	Subtotal of Estimated Cost	\$

RESOLUTION 1799

**PHA Certifications of Compliance with the PHA Plans and Related Regulations:
Board Resolution to Accompany the PHA 5-Year and Annual PHA Plan**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the X 5-Year and X Annual PHA Plan for the PHA fiscal year beginning 04/01/2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.
3. The PHA certifies that there has been no change, significant or otherwise, to the Capital Fund Program (and Capital Fund Program/Replacement Housing Factor) Annual Statement(s), since submission of its last approved Annual Plan. The Capital Fund Program Annual Statement/Annual Statement/Performance and Evaluation Report must be submitted annually even if there is no change.
4. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
5. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
6. The PHA certifies that it will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
7. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
8. For PHA Plan that includes a policy for site based waiting lists:
 - The PHA regularly submits required data to HUD's 50058 PIC/IMS Module in an accurate, complete and timely manner (as specified in PIH Notice 2006-24);
 - The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
 - Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
 - The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
 - The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
9. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
10. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
11. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.

12. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
13. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
14. The PHA will provide the responsible entity or HUD any documentation that the responsible entity or HUD needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58 or Part 50, respectively.
15. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under Section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
16. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
17. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act, the Residential Lead-Based Paint Hazard Reduction Act of 1992, and 24 CFR Part 35.
18. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments), 2 CFR Part 225, and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments).
19. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
20. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.
21. The PHA provides assurance as part of this certification that:
 - (i) The Resident Advisory Board had an opportunity to review and comment on the changes to the policies and programs before implementation by the PHA;
 - (ii) The changes were duly approved by the PHA Board of Directors (or similar governing body); and
 - (iii) The revised policies and programs are available for review and inspection, at the principal office of the PHA during normal business hours.
22. The PHA certifies that it is in compliance with all applicable Federal statutory and regulatory requirements.


The West Palm Beach Housing Authority
PHA Name

FL009
PHA Number/HA Code

☒ 5-Year PHA Plan for Fiscal Years 2011 - 2015

☒ Annual PHA Plan for Fiscal Years 2011- 2012

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. **Warning:** HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

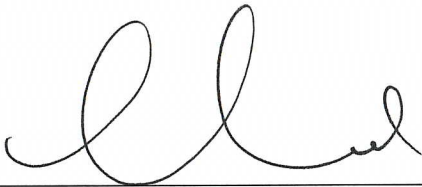
Name of Authorized Official	Title
Thyra Echols Starr	Chairperson
Signature 	Date: 12/15/2010

**Certification by State or Local
Official of PHA Plans Consistency
with the Consolidated Plan**

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

**Certification by State or Local Official of PHA Plans Consistency with the
Consolidated Plan**

I, Lois J. Frankel the Mayor certify that the Five Year and
Annual PHA Plan of the West Palm Beach Housing Authority is consistent with the Consolidated Plan of
The City of West Palm Beach prepared pursuant to 24 CFR Part 91.



Signed / Dated by Appropriate State or Local Official

CITY ATTORNEY'S OFFICE
Approved as to form
and legal sufficiency
By: SHR
Date: 12-16-10

Certification for a Drug-Free Workplace

U.S. Department of Housing
and Urban Development

Applicant Name

The West Palm Beach Housing Authority

Program/Activity Receiving Federal Grant Funding

PHA Five-Year and Annual Plan

Acting on behalf of the above named Applicant as its Authorized Official, I make the following certifications and agreements to the Department of Housing and Urban Development (HUD) regarding the sites listed below:

I certify that the above named Applicant will or will continue to provide a drug-free workplace by:

a. Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the Applicant's workplace and specifying the actions that will be taken against employees for violation of such prohibition.

b. Establishing an on-going drug-free awareness program to inform employees ---

(1) The dangers of drug abuse in the workplace;

(2) The Applicant's policy of maintaining a drug-free workplace;

(3) Any available drug counseling, rehabilitation, and employee assistance programs; and

(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.

c. Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph a.;

d. Notifying the employee in the statement required by paragraph a. that, as a condition of employment under the grant, the employee will ---

(1) Abide by the terms of the statement; and

(2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;

e. Notifying the agency in writing, within ten calendar days after receiving notice under subparagraph d.(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to every grant officer or other designee on whose grant activity the convicted employee was working, unless the Federal agency has designated a central point for the receipt of such notices. Notice shall include the identification number(s) of each affected grant;

f. Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph d.(2), with respect to any employee who is so convicted ---

(1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or

(2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency;

g. Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs a. thru f.

2. **Sites for Work Performance.** The Applicant shall list (on separate pages) the site(s) for the performance of work done in connection with the HUD funding of the program/activity shown above: Place of Performance shall include the street address, city, county, State, and zip code. Identify each sheet with the Applicant name and address and the program/activity receiving grant funding.)

1715 Division Avenue
West Palm Beach, Florida 33407

Check here ☐ if there are workplaces on file that are not identified on the attached sheets.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.
Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Laurel Robinson

Title

Executive Director

Signature

Date

X

Jan-13, 2011

Certification of Payments to Influence Federal Transactions

U.S. Department of Housing
and Urban Development
Office of Public and Indian Housing

Applicant Name

The West Palm Beach Housing Authority

Program/Activity Receiving Federal Grant Funding

PHA Five-Year and Annual Plan

The undersigned certifies, to the best of his or her knowledge and belief, that:

(1) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.

(2) If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of an agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.

(3) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subcontracts, subgrants, and contracts under grants, loans, and cooperative agreements) and that all subrecipients shall certify and disclose accordingly.

This certification is a material representation of fact upon which reliance was placed when this transaction was made or entered into. Submission of this certification is a prerequisite for making or entering into this transaction imposed by Section 1352, Title 31, U.S. Code. Any person who fails to file the required certification shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate.

Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties.
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

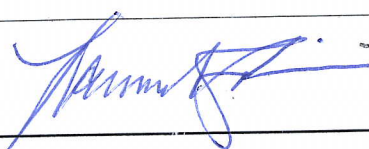
Name of Authorized Official

Laurel Robinson

Title

Executive Director

Signature



Date (mm/dd/yyyy)

Jan. 13, 2011

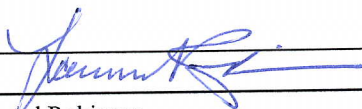
DISCLOSURE OF LOBBYING ACTIVITIES

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

Approved by OMB

0348-0046

(See reverse for public burden disclosure.)

1. Type of Federal Action: <input checked="" type="checkbox"/> a. contract <input type="checkbox"/> b. grant <input type="checkbox"/> c. cooperative agreement <input type="checkbox"/> d. loan <input type="checkbox"/> e. loan guarantee <input type="checkbox"/> f. loan insurance		2. Status of Federal Action: <input checked="" type="checkbox"/> a. bid/offer/application <input type="checkbox"/> b. initial award <input type="checkbox"/> c. post-award		3. Report Type: <input checked="" type="checkbox"/> a. initial filing <input type="checkbox"/> b. material change For Material Change Only: year _____ quarter _____ date of last report _____	
4. Name and Address of Reporting Entity: <input checked="" type="checkbox"/> Prime <input type="checkbox"/> Subawardee Tier _____, if known: Congressional District, if known: 4c 23			5. If Reporting Entity in No. 4 is a Subawardee, Enter Name and Address of Prime: Congressional District, if known:		
6. Federal Department/Agency: The West Palm Beach Housing Authority			7. Federal Program Name/Description: Five-Year and Annual Plan CFDA Number, if applicable: _____		
8. Federal Action Number, if known: N/A			9. Award Amount, if known: \$ N/A		
10. a. Name and Address of Lobbying Registrant (if individual, last name, first name, MI): N/A			b. Individuals Performing Services (including address if different from No. 10a) (last name, first name, MI): N/A		
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when this transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.			Signature:  Print Name: Laurel Robinson Title: Executive Director Telephone No.: 561-655-8530 ext 108 Date: 1-13-11		
Federal Use Only:					Authorized for Local Reproduction Standard Form LLL (Rev. 7-97)

FL009i01

Resident Advisory Board (RAB) Comments

A meeting was held on December 10, 2010 to entertain comments regarding the FY2011 PHA Plan.

Residents were excited and provided positive feedback regarding the plan to build nine units using Replacement Housing Factor (RHF) funds.

The WPBHA did not have to amend the plan since residents were in agreement with improvements that were already included in the Five-year Action Plan.

Civil Rights Certification

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Civil Rights Certification**Annual Certification and Board Resolution**

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioner, I approve the submission of the Plan for the PHA of which this document is a part and make the following certification and agreement with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and implementation thereof:

The PHA certifies that it will carry out the public housing program of the agency in conformity with title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990, and will affirmatively further fair housing.

The West Palm Beach Housing Authority

FL009

PHA Name

PHA Number/HA Code

I hereby certify that all the information stated herein, as well as any information provided in the accompaniment herewith, is true and accurate. Warning: HUD will prosecute false claims and statements. Conviction may result in criminal and/or civil penalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)

Name of Authorized Official

Thyra Echols Starr

Title

Chairperson

Signature

Thyra E. Starr

Date

1/13/11

IDENTIFICATION OF HOUSING NEEDS

The following characteristics, are rated by the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being “no impact” and 5 being “severe impact.”

Family Type	Overall Estimated No. of renter households with housing needs	Afford- ability	Supply	Quality	Accessibility	Size	Location
Income <= 30% of AMI	50,485	5	5	3	5	3	5
Income >30% but <=50% of AMI	52,200	5	5	3	5	3	5
Income >50% but <80% of AMI	86,415	4	4	3	4	3	5
Elderly	85,895	3	1	3	4	3	5
Families with Disabilities	79,835	3	3	3	5	4	5
Race/Ethnicity – White	83,907	1	1	1	2	1	3
Race/Ethnicity - Black	25,095	3	3	2	2	3	5
Race/Ethnicity – Hispanic –	17,702	3	3	2	2	3	5

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-10 Replacement Housing Factor Grant No: Date of CFFP: 10/01/2010			FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$100,000.00		\$100,000.00	0
3	1408 Management Improvements	\$60,000.00		0	0
4	1410 Administration (may not exceed 10% of line 21)	\$108,721.00		\$108,721.00	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$100,000.00		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement	\$123,493.00		\$7,000.00	0
10	1460 Dwelling Structures	\$540,000.00		0	0
11	1465.1 Dwelling Equipment—Nonexpendable	\$20,000.00		0	0
12	1470 Non-dwelling Structures	\$15,000.00		0	0
13	1475 Non-dwelling Equipment	\$20,000.00		0	0
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$1,087,530.00		\$215,721.00	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

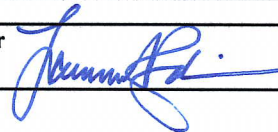
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary				
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-10 Date of CFFP: 10/01/2009		FFY of Grant: 2010 FFY of Grant Approval: 2010
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director 		Date 02/14/2011	Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: FL14P009501-10 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:			Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE	Operations	1406		\$100,000.0		\$100,000.00	0	
PHA WIDE	Administration	1410		\$108,721.00		\$108,721.00	0	
PHA WIDE	Management Improvements	1408		\$50,000.00		0	0	
	Server to host web appl. waiting list							
	SQL Server 2008, User licenses							
	Emphasis Optimization tech. services							
	Summer Camp PHA kids							
PHA WIDE	Fees & Costs	1430		\$100,000.00		0	0	
PHA WIDE	Dwelling Equipment- Non-expendable	1465.1		\$25,000.00		0	0	
	Purchase refrigerators & stoves							
PHA WIDE	SOUTHRIDGE APTS.	1460		\$440,000.00		0	0	
	Purchase/Install a/c units		148					
FL009-00022	SOUTHRIDGE APTS.							
	Site Improvements	1450		0	0	0	0	
	Dwelling Structures	1460		0	0	0	0	
FL009-0503	TWIN LAKES							
	Landscaping	1450		0	0	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-10 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:				Federal FFY of Grant: 2010		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
FL009-0504	ROBINSON VILL/PLEASANT CITY							
	Site Improvements	1450		\$50,000.00	\$50,000.00	\$33,375.00	\$33,375.00	ongoing
	Unit Remodelling	1460		\$250,030.00	\$250,030.00	\$78,890.00	\$57,725.01	ongoing
	Total			\$1,087,530.00	\$1,087,530.00	\$250,000.00	\$171,772.90	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2010
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[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2010
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-09 Replacement Housing Factor Grant No: Date of CFFP: 10/01/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	0	\$118,000.00	0	0
3	1408 Management Improvements	\$50,000.00	\$50,000.00	0	0
4	1410 Administration (may not exceed 10% of line 21)	\$200,000.00	\$125,000.00	\$81,000.00	\$70,804.29
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$100,000.00	\$100,000.00	\$50,000.00	\$3133.57
8	1440 Site Acquisition				
9	1450 Site Improvement	\$50,000.00	\$53,375.00	\$33,375.00	\$33,375.00
10	1460 Dwelling Structures	\$250,030.00	\$559,155.00	\$81,914.00	\$57,725.01
11	1465.1 Dwelling Equipment—Nonexpendable	\$60,000.00	\$32,000.00	0	\$3,024.00
12	1470 Non-dwelling Structures	0	0	0	0
13	1475 Non-dwelling Equipment	\$40,000.00	\$25,000.00	\$3711.00	\$3711.00
14	1485 Demolition	\$337,500.00	\$25,000.00	0	
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA		0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$1,087,530.00	\$1,087,530.00	\$250,000.00	\$171,772.90
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

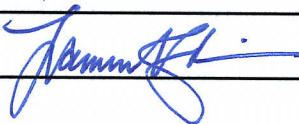
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-09 Replacement Housing Factor Grant No: Date of CFFP: 10/01/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011	Signature of Public Housing Director Date		

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: FL14P009501-09 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE	Operations	1406		0	\$118,000.00	0	0	not started
PHA WIDE	Management Improvements	1408		\$50,000.00	\$50,000.00	0	0	not started
PHA WIDE	Administration	1410		\$200,000.00	\$125,000.00	\$81,000.00	\$70,804.29	ongoing
PHA WIDE	Dwell. Equip. Non-Expendable	1465		\$60,000.00	\$50,000.00	\$3,024.00	\$3,024.00	ongoing
PHA WIDE	Non-Dwelling Structures	1470		0	\$22,000.00	0	0	
PHA WIDE	Fees & Costs	1430		\$100,000.00	\$100,000.00	\$50,000.00	\$3,133.57	ongoing
PHA WIDE	Non-Dwell. Equipment	1475		\$40,000.00	\$25,000.00	\$3,711.00	\$3,711.00	ongoing
FL009-00011	DUNBAR VILLAGE							
	Site Improvements	1450		\$				
	Dwelling Structures	1460						
	Demolition	1485		\$337,500.00	\$25,000.00	0	0	
FL009-00022	SOUTHRIDGE APTS.							
	Site Improvements	1450		0	0	0	0	
	Dwelling Structures	1460		0	0	0	0	
FL009-0503	TWIN LAKES							
	Landscaping	1450		0	0	0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-09 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ₂	Funds Expended ²	
FL009-0504	ROBINSON VILL/PLEASANT CITY							
	Site Improvements	1450		\$50,000.00	\$50,000.00	\$33,375.00	\$33,375.00	ongoing
	Unit Remodelling	1460		\$250,030.00	\$250,030.00	\$78,890.00	\$57,725.01	ongoing
	Total			\$1,087,530.00	\$1,087,530.00	\$250,000.00	\$171,772.90	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: **WEST PALM BEACH HOUSING AUTHORITY**

Federal FFY of Grant:	2009
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

2008

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-08 Replacement Housing Factor Grant No: Date of CFFP: 10/01/2008			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³	\$ 150,000.00	\$ 150,000.00	\$ 150,000.00	\$ 150,000.00
3	1408 Management Improvements	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00	\$ 45,921.07
4	1410 Administration (may not exceed 10% of line 21)	\$ 80,000.00	\$ 200,000.00	\$ 200,000.00	\$ 200,000.04
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 186,278.00	\$ 186,278.00	\$ 186,278.00	\$ 114,721.71
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 0.00	\$ 46,500.00	\$ 46,500.00	\$ 41,795.49
10	1460 Dwelling Structures	\$ 222,037.00	\$ 375,537.00	\$ 375,537.00	\$ 48,911.35
11	1465.1 Dwelling Equipment—Nonexpendable	\$ 20,000.00	\$ 50,000.00	\$ 50,000.00	\$ 50,000.00
12	1470 Non-dwelling Structures	\$ 0.00	\$ 22,000.00	\$ 22,000.00	0
13	1475 Non-dwelling Equipment	\$ 22,000.00	\$ 20,000.00	\$ 20,000.00	\$ 19,856.54
14	1485 Demolition	\$ 20,000.00	0	0	
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA	\$ 350,000.00	0	0	0
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$1,100,315.00	\$1,100,315.00	\$1,100,315.00	\$ 671,206.20
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.


² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-08 Replacement Housing Factor Grant No: NO Date of CFFP: 10/01/2008			FFY of Grant: 2008 FFY of Grant Approval: 2008
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/15/2011	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: FL14P009501-08 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:			Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA WIDE	Operations	1406		\$150,000.00	\$150,000.00	\$150,000.00	\$150,000.00	completed
PHA WIDE	Management Improvements	1408		\$50,000.00	\$50,000.00	\$50,000.00	\$45,921.07	ongoing
PHA WIDE	Administration	1410		\$200,000.00	\$200,000.00	\$200,000.00	\$200,000.04	completed
PHA WIDE	Dwell. Equip. Non-Expendable	1465		\$50,000.00	\$50,000.00	\$50,000.00	\$50,000.00	completed
PHA WIDE	Non-Dwelling Structures	1470		0	\$22,000.00	\$22,000.00	0	not started
PHA WIDE	Fees & Costs	1430		\$186,278.00	\$186,278.00	\$186,278.00	\$114,721.71	ongoing
PHA WIDE	Non-Dwell. Equipment	1475		\$22,000.00	\$20,000.00	\$20,000.00	\$19,856.54	ongoing
FL009-00011	DUNBAR VILLAGE							
	Site Improvements	1450		\$				
	Dwelling Structures	1460						
	Demolition	1485		\$20,000.00	\$20,000.00	0	0	
FL009-00022	SOUTHRIDGE APTS.							
	Site Improvements	1450		0	0	0	0	
	Dwelling Structures	1460		0	0	0	0	
FL009-0503	TWIN LAKES							
	Landscaping	1450		0	\$46,500.00	\$46,500.00	\$41,795.49	ongoing

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14P009501-08 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:				Federal FFY of Grant: 2008		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
FL009-0504	ROBINSON VILL/PLEASANT CITY							
	Site Improvements	1450		0	0	0	0	n/a
	Unit Remodelling	1460		\$222,037.00	\$375,537.00	\$375,537.00	\$48,911.35	ongoing
	Total			\$1,100,315.00	\$1,100,315.00	\$1,100,315.00	\$652,645.49	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2008
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[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2008
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2004 FFY of Grant Approval: 2004	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$34,890.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$34,890.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

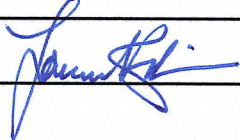
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2004 FFY of Grant Approval: 2004	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

[illegible]

² To be completed for the Performance and Evaluation Report.

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

[illegible]

form HUD-50075.1 (4/2008)

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2005 FFY of Grant Approval: 2005	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$32,510.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$32,510.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

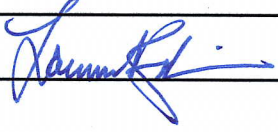
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary				
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504 FFY of Grant: 2005 FFY of Grant Approval: 2005
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director 		Date 02/16/2011	Signature of Public Housing Director Date	

[illegible]

² To be completed for the Performance and Evaluation Report.

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2009
------------------------------	-------------

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2006 FFY of Grant Approval: 2006	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$83,075.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$83,075.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

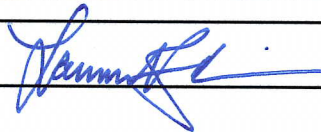
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2006 FFY of Grant Approval: 2006	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name:
WEST PALM BEACH HOUSING
AUTHORITY

Capital Fund Program Grant No:
Replacement Housing Factor Grant No: FL14R009501-06

Federal FFY of Grant:

Development Number	Name/PHA-Wide Activities

Development
Account No.

Total Estimated Cost

Status of Work

Original

Revised ¹

Funds Obligated	2
-----------------	---

Funds
Expended ²

² To be completed for the Performance and Evaluation Report.

PHA Name: **WEST PALM BEACH HOUSING AUTHORITY**

Federal FFY of Grant:	2006
------------------------------	-------------

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Development Number	Name/PHA-Wide Activities

**All Funds Expended
(Quarter Ending Date)**

[illegible][illegible]

Original Expenditure	End Date
1000000	12/31/2000
2000000	12/31/2001
3000000	12/31/2002
4000000	12/31/2003
5000000	12/31/2004
6000000	12/31/2005
7000000	12/31/2006
8000000	12/31/2007
9000000	12/31/2008
10000000	12/31/2009
11000000	12/31/2010
12000000	12/31/2011
13000000	12/31/2012
14000000	12/31/2013
15000000	12/31/2014
16000000	12/31/2015
17000000	12/31/2016
18000000	12/31/2017
19000000	12/31/2018
20000000	12/31/2019
21000000	12/31/2020
22000000	12/31/2021
23000000	12/31/2022
24000000	12/31/2023
25000000	12/31/2024
26000000	12/31/2025
27000000	12/31/2026
28000000	12/31/2027
29000000	12/31/2028
30000000	12/31/2029
31000000	12/31/2030
32000000	12/31/2031
33000000	12/31/2032
34000000	12/31/2033
35000000	12/31/2034
36000000	12/31/2035
37000000	12/31/2036
38000000	12/31/2037
39000000	12/31/2038
40000000	12/31/2039
41000000	12/31/2040
42000000	12/31/2041
43000000	12/31/2042
44000000	12/31/2043
45000000	12/31/2044
46000000	12/31/2045
47000000	12/31/2046
48000000	12/31/2047
49000000	12/31/2048
50000000	12/31/2049
51000000	12/31/2050
52000000	12/31/2051
53000000	12/31/2052
54000000	12/31/2053
55000000	12/31/2054
56000000	12/31/2055
57000000	12/31/2056
58000000	12/31/2057
59000000	12/31/2058
60000000	12/31/2059
61000000	12/31/2060
62000000	12/31/2061
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64000000	12/31/2063
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72000000	12/31/2071
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74000000	12/31/2073
75000000	12/31/2074
76000000	12/31/2075
77000000	12/31/2076
78000000	12/31/2077
79000000	12/31/2078
80000000	12/31/2079
81000000	12/31/2080
82000000	12/31/2081
83000000	12/31/2082
84000000	12/31/2083
85000000	12/31/2084
86000000	12/31/2085
87000000	12/31/2086
88000000	12/31/2087
89000000	12/31/2088
90000000	12/31/2089
91000000	12/31/2090
92000000	12/31/2091
93000000	12/31/2092
94000000	12/31/2093
95000000	12/31/2094
96000000	12/31/2095
97000000	12/31/2096
98000000	12/31/2097
99000000	12/31/2098
100000000	12/31/2099

Actual Expenditure
End Date

Page 6 of 6

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2007	
				FFY of Grant Approval: 2007	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$78,414.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$78,414.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

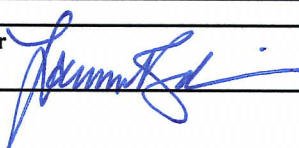
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2007	
				FFY of Grant Approval: 2007	
Type of Grant					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director	
				Date	

PHA Name:
WEST PALM BEACH HOUSING
AUTHORITY

Capital Fund Program Grant No:
Replacement Housing Factor Grant No: FL14R009501-07

Federal FFY of Grant:[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name:
WEST PALM BEACH HOUSING
AUTHORITY

Replacement Housing Factor Grant No: FL14R009501-07

2007

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant: 2007

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

[illegible]

Page 6 of 6

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

complete

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009502	
				FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$35,029.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$35,029.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

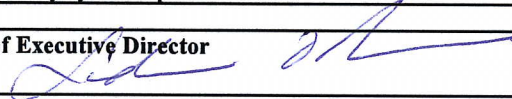
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009509	
				FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Development Number	Name/PHA-Wide Activities

**All Fund Obligated
(Quarter Ending Date)**

All Funds Expended
(Quarter Ending Date)

Reasons for Revised Target Dates ¹[illegible]

Actual Obligation	End Date

	Original Expenditure	End Date
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
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89		
90		
91		
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93		
94		
95		
96		
97		
98		
99		
100		

Actual Expenditure	End Date
1000000	12/31/2023
2000000	12/31/2024
3000000	12/31/2025
4000000	12/31/2026
5000000	12/31/2027
6000000	12/31/2028
7000000	12/31/2029
8000000	12/31/2030
9000000	12/31/2031
10000000	12/31/2032
11000000	12/31/2033
12000000	12/31/2034
13000000	12/31/2035
14000000	12/31/2036
15000000	12/31/2037
16000000	12/31/2038
17000000	12/31/2039
18000000	12/31/2040
19000000	12/31/2041
20000000	12/31/2042
21000000	12/31/2043
22000000	12/31/2044
23000000	12/31/2045
24000000	12/31/2046
25000000	12/31/2047
26000000	12/31/2048
27000000	12/31/2049
28000000	12/31/2050
29000000	12/31/2051
30000000	12/31/2052
31000000	12/31/2053
32000000	12/31/2054
33000000	12/31/2055
34000000	12/31/2056
35000000	12/31/2057
36000000	12/31/2058
37000000	12/31/2059
38000000	12/31/2060
39000000	12/31/2061
40000000	12/31/2062
41000000	12/31/2063
42000000	12/31/2064
43000000	12/31/2065
44000000	12/31/2066
45000000	12/31/2067
46000000	12/31/2068
47000000	12/31/2069
48000000	12/31/2070
49000000	12/31/2071
50000000	12/31/2072
51000000	12/31/2073
52000000	12/31/2074
53000000	12/31/2075
54000000	12/31/2076
55000000	12/31/2077
56000000	12/31/2078
57000000	12/31/2079
58000000	12/31/2080
59000000	12/31/2081
60000000	12/31/2082
61000000	12/31/2083
62000000	12/31/2084
63000000	12/31/2085
64000000	12/31/2086
65000000	12/31/2087
66000000	12/31/2088
67000000	12/31/2089
68000000	12/31/2090
69000000	12/31/2091
70000000	12/31/2092
71000000	12/31/2093
72000000	12/31/2094
73000000	12/31/2095
74000000	12/31/2096
75000000	12/31/2097
76000000	12/31/2098
77000000	12/31/2099
78000000	12/31/2100
79000000	12/31/2101
80000000	12/31/2102
81000000	12/31/2103
82000000	12/31/2104
83000000	12/31/2105
84000000	12/31/2106
85000000	12/31/2107
86000000	12/31/2108
87000000	12/31/2109
88000000	12/31/2110
89000000	12/31/2111
90000000	12/31/2112
91000000	12/31/2113
92000000	12/31/2114
93000000	12/31/2115
94000000	12/31/2116
95000000	12/31/2117
96000000	12/31/2118
97000000	12/31/2119
98000000	12/31/2120
99000000	12/31/2121
100000000	12/31/2122
101000000	12/31/2123
102000000	12/31/2124
103000000	12/31/2125
104000000	12/31/2126
105000000	12/31/2127
106000000	12/31/2128
107000000	12/31/2129
108000000	12/31/2130
109000000	12/31/2131
110000000	1

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Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009502+	
				FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$35,099.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$35,099.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

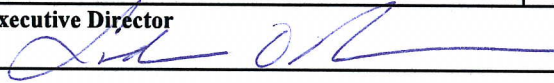
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009509	
				FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2009
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[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Development Number	Name/PHA-Wide Activities

All Fund Obligated
(Quarter Ending Date)

All Funds Expended
(Quarter Ending Date)

Reasons for Revised Target Dates ¹

Original Obligation	End Date
1.000000	10/1/2000
0.999999	10/1/2000
0.999998	10/1/2000
0.999997	10/1/2000
0.999996	10/1/2000
0.999995	10/1/2000
0.999994	10/1/2000
0.999993	10/1/2000
0.999992	10/1/2000
0.999991	10/1/2000
0.999990	10/1/2000
0.999989	10/1/2000
0.999988	10/1/2000
0.999987	10/1/2000
0.999986	10/1/2000
0.999985	10/1/2000
0.999984	10/1/2000
0.999983	10/1/2000
0.999982	10/1/2000
0.999981	10/1/2000
0.999980	10/1/2000
0.999979	10/1/2000
0.999978	10/1/2000
0.999977	10/1/2000
0.999976	10/1/2000
0.999975	10/1/2000
0.999974	10/1/2000
0.999973	10/1/2000
0.999972	10/1/2000
0.999971	10/1/2000
0.999970	10/1/2000
0.999969	10/1/2000
0.999968	10/1/2000
0.999967	10/1/2000
0.999966	10/1/2000
0.999965	10/1/2000
0.999964	10/1/2000
0.999963	10/1/2000
0.999962	10/1/2000
0.999961	10/1/2000
0.999960	10/1/2000
0.999959	10/1/2000
0.999958	10/1/2000
0.999957	10/1/2000
0.999956	10/1/2000
0.999955	10/1/2000
0.999954	10/1/2000
0.999953	10/1/2000
0.999952	10/1/2000
0.999951	10/1/2000
0.999950	10/1/2000
0.999949	10/1/2000
0.999948	10/1/2000
0.999947	10/1/2000
0.999946	10/1/2000
0.999945	10/1/2000
0.999944	10/1/2000
0.999943	10/1/2000
0.999942	10/1/2000
0.999941	10/1/2000
0.999940	10/1/2000
0.999939	10/1/2000
0.999938	10/1/2000
0.999937	10/1/2000
0.999936	10/1/2000
0.999935	10/1/2000
0.999934	10/1/2000
0.999933	10/1/2000
0.999932	10/1/2000
0.999931	10/1/2000
0.999930	10/1/2000
0.999929	10/1/2000
0.999928	10/1/2000
0.999927	10/1/2000
0.999926	10/1/2000
0.999925	10/1/2000
0.999924	10/1/2000
0.999923	10/1/2000
0.999922	10/1/2000
0.999921	10/1/2000
0.999920	10/1/2000
0.999919	10/1/2000
0.999918	10/1/2000
0.999917	10/1/2000
0.999916	10/1/2000
0.999915	10/1/2000
0.999914	10/1/2000
0.999913	10/1/2000
0.999912	10/1/2000
0.999911	10/1/2000
0.999910	10/1/2000
0.999909	10/1/2000
0.999908	10/1/2000
0.999907	10/1/2000
0.999906	10/1/2000
0.999905	10/1/2000
0.999904	10/1/2000
0.999903	10/1/2000
0.999902	10/1/2000
0.999901	10/1/2000
0.999900	10/1/2000
0.999899	10/1/2000
0.999898	10/1/2000
0.999897	10/1/2000
0.999896	10/1/2000
0.999895	10/1/2000
0.999894	10/1/2000
0.999893	10/1/2000
0.999892	10/1/2000
0.999891	10/1/2000
0.999890	10/1/2000
0.999889	10/1/2000
0.999888	10/1/

Actual Obligation
End Date

Original Expenditure	End Date
1000000	12/31/2010
2000000	12/31/2011
3000000	12/31/2012
4000000	12/31/2013
5000000	12/31/2014
6000000	12/31/2015
7000000	12/31/2016
8000000	12/31/2017
9000000	12/31/2018
10000000	12/31/2019
11000000	12/31/2020
12000000	12/31/2021
13000000	12/31/2022
14000000	12/31/2023
15000000	12/31/2024
16000000	12/31/2025
17000000	12/31/2026
18000000	12/31/2027
19000000	12/31/2028
20000000	12/31/2029
21000000	12/31/2030
22000000	12/31/2031
23000000	12/31/2032
24000000	12/31/2033
25000000	12/31/2034
26000000	12/31/2035
27000000	12/31/2036
28000000	12/31/2037
29000000	12/31/2038
30000000	12/31/2039
31000000	12/31/2040
32000000	12/31/2041
33000000	12/31/2042
34000000	12/31/2043
35000000	12/31/2044
36000000	12/31/2045
37000000	12/31/2046
38000000	12/31/2047
39000000	12/31/2048
40000000	12/31/2049
41000000	12/31/2050
42000000	12/31/2051
43000000	12/31/2052
44000000	12/31/2053
45000000	12/31/2054
46000000	12/31/2055
47000000	12/31/2056
48000000	12/31/2057
49000000	12/31/2058
50000000	12/31/2059
51000000	12/31/2060
52000000	12/31/2061
53000000	12/31/2062
54000000	12/31/2063
55000000	12/31/2064
56000000	12/31/2065
57000000	12/31/2066
58000000	12/31/2067
59000000	12/31/2068
60000000	12/31/2069
61000000	12/31/2070
62000000	12/31/2071
63000000	12/31/2072
64000000	12/31/2073
65000000	12/31/2074
66000000	12/31/2075
67000000	12/31/2076
68000000	12/31/2077
69000000	12/31/2078
70000000	12/31/2079
71000000	12/31/2080
72000000	12/31/2081
73000000	12/31/2082
74000000	12/31/2083
75000000	12/31/2084
76000000	12/31/2085
77000000	12/31/2086
78000000	12/31/2087
79000000	12/31/2088
80000000	12/31/2089
81000000	12/31/2090
82000000	12/31/2091
83000000	12/31/2092
84000000	12/31/2093
85000000	12/31/2094
86000000	12/31/2095
87000000	12/31/2096
88000000	12/31/2097
89000000	12/31/2098
90000000	12/31/2099
91000000	12/31/2100
92000000	12/31/2101
93000000	12/31/2102
94000000	12/31/2103
95000000	12/31/2104
96000000	12/31/2105
97000000	12/31/2106
98000000	12/31/2107
99000000	12/31/2108
100000000	12/31/2109
101000000	12/31/2110
102000000	12/31/2111
103000000	12/31/2112
104000000	12/31/2113
105000000	12/31/2114
106000000	12/31/2115
107000000	12/31/2116
108000000	12/31/2117
109000000	12/31/2118
110000000	1

Actual Expenditure
End Date

Page 6 of 6

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009502	
				FFY of Grant: 2008 FFY of Grant Approval: 2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$33,387.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$33,387.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

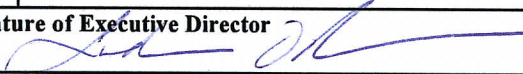
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009502 FFY of Grant: 2008 FFY of Grant Approval: 2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

[illegible]

² To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

[illegible]

Page 5 of 6

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

[illegible]

form HUD-50075.1 (4/2008)

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$46,903.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$46,903.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

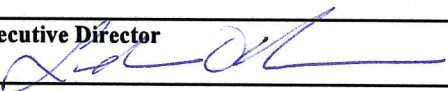
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2010 FFY of Grant Approval: 2010	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

[illegible]

² To be completed for the Performance and Evaluation Report.

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2009 FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$46,994.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$46,994.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

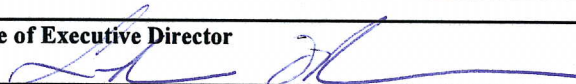
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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2009	
				FFY of Grant Approval: 2009	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director		Date 02/16/2011		Signature of Public Housing Director	
				Date	

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2009
------------------------------	------

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
Capital Fund Program, Capital Fund Program Replacement Housing Factor and
Capital Fund Financing Program

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
OMB No. 2577-0226
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: _____ Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009501	
				FFY of Grant: 2008 FFY of Grant Approval: 2008	
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴	\$46,179.00		0	0
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$46,179.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

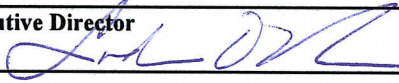
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: Date of CFFP: _____		Replacement Housing Factor Grant No: FL14R009504	
				FFY of Grant: 2008	
				FFY of Grant Approval: 2008	
Type of Grant					
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011		Signature of Public Housing Director Date	

PHA Name:
WEST PALM BEACH HOUSING
AUTHORITY

Replacement Housing Factor Grant No: FL14R009501-08

2008

[illegible]

² To be completed for the Performance and Evaluation Report.

[illegible]

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant: 2008

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:	2008
------------------------------	------

[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14s009501-09 Replacement Housing Factor Grant No: no Date of CFFP: 10/01/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$149,350.00		\$149,350.00	\$103,338.00
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$50,146.00		\$50,146.00	\$50,146.00
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,294,000.00		\$1,294,000.00	\$774,917.00
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$1,493,496.00		\$1,493,496.00	\$928,491.00
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

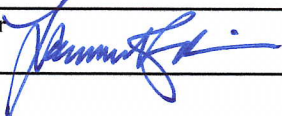
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14S009501-09 Replacement Housing Factor Grant No: no Date of CFFP: 10/01/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/01/2011		Signature of Public Housing Director Date	

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14S009501-09 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
FL009 -504 & 503	Administration	1410		\$149,350.00		\$149,350.00	\$103,388.00	ongoing
FL009 -00503	Fees & Costs	1430	120 units	\$18,014.00		\$18,014.00	\$18,014.00	completed
FL009 -00504	Fees & Costs	1430	58 units	\$32,132.00		\$32,132.00	\$32,132.00	completed
FL009 -00503	TWIN LAKES							
	Replace kitchen cabinets, ounter top,	1460	120 units	\$272,608.00		\$272,608.00	\$149,652.00	ongoing
	sink and faucet and paint							
	Gutters	1460	120 units	\$20,192.00		\$20,192.00	0	ongoing
	Bathroom renovations, replace vanity	1460	120 units	\$28,849.00		\$28,849.00	0	ongoing
	cabinet, sink and faucet							
	Appliances -gas range & hood fan	1465	120 units	\$54,000.00		\$54,000.00	\$54,000.00	ongoing
FL009 -00504	PLEASANT CITY							
	Bathroom Renovations, light fixtures,	1460	58 units	\$374,100.00		\$374,100.00	\$242,263.00	ongoing
	paint, ceramic floor tiles, drywall,							
	replace tub, vanity, sink and faucet							
	electrical wiring in wall							
	plumbing in floor and wall							

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY			Grant Type and Number Capital Fund Program Grant No: FL14S009501-09 CFFP (Yes/ No): YES Replacement Housing Factor Grant No:			Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
FL009-0504	PLEASANT CITY							
	Kitchen Renovations- Replace	1460	58 units	\$297,801.00		\$297,801.00	\$196,655.00	ongoing
	kitchen Cabinets, counter tops, sinks							
	and faucet, plumbing in wall & floor							
	electrical wiring in walls, replace							
	drywall & paint							
	Bedroom Renovation- Terazo floor	1460	58 units	\$79,550.00		\$79,550.00	\$49,900.00	ongoing
	restoration, electrical wiring in walls,							
	electrical fixtures & receptacles, paint							
	replace doors, frames and hardware							
	Living area Renovation- Terazo floor	1460	58 units	\$70,950.00		\$70,950.00	\$46,056.00	ongoing
	restoration, repl. door, frames &							
	hardware, elec.wiring, fixtures & paint							
	Tankless water heaters	1460	58 units	\$40,850.00		\$40,850.00	\$2,430.00	ongoing
	Appliances	1465	58 units	\$58,100.00		\$58,100.00	\$34,501.00	ongoing
	TOTAL			\$1,493,496.00		\$1,493,496.00	\$928,491.00	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Federal FFY of Grant:
2009[illegible]

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 Expires 4/30/2011

Part I: Summary				
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL14S009501-09 Replacement Housing Factor Grant No: no Date of CFFP: <u>10/01/2009</u>		FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: <u>09/30/2010</u> <input type="checkbox"/> Final Performance and Evaluation Report				
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹
		Original	Revised ²	Obligated Expended
Signature of Executive Director		Date 02/01/2011	Signature of Public Housing Director Date	

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
 OMB No. 2577-0226
 Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL00900002209E Replacement Housing Factor Grant No: Date of CFFP: 09/28/2009			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)	\$75,000.00		0	0
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$55,000.00		0	0
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$1,580,000.00		0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Non-dwelling Structures				
13	1475 Non-dwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 – 19)	\$1,710,000.00		0	0
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures				

¹ To be completed for the Performance and Evaluation Report.

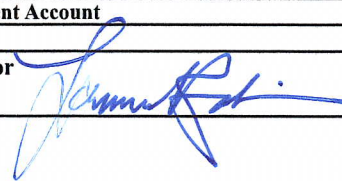
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Annual Statement/Performance and Evaluation Report
 Capital Fund Program, Capital Fund Program Replacement Housing Factor and
 Capital Fund Financing Program

U.S. Department of Housing and Urban Development
 Office of Public and Indian Housing
Expires 4/30/2011

Part I: Summary					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL00900002209E Replacement Housing Factor Grant No: Date of CFFP: _____			FFY of Grant: 2009 FFY of Grant Approval: 2009
Type of Grant <input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 09/30/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
Signature of Executive Director 		Date 02/16/2011	Signature of Public Housing Director		Date

Part II: Supporting Pages								
PHA Name: WEST PALM BEACH HOUSING AUTHORITY		Grant Type and Number Capital Fund Program Grant No: FL00900002209E CFFP (Yes/ No): YES Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009		
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
FL00900002209E	Administration	1410	148	\$75,000.00		0	0	
	Salaries & Benefits for oversight							
FL00900002209E	Fees & Costs	1430	148	\$55,000.00		0	0	
	Architectural Design & Permit Fees							
FL00900002209E	UFAS- Bathroom Renovation	1460	148	\$518,000.00		0	0	
	UFAS- Kitchen Renovation	1460	148	\$947,000.00		0	0	
	UFAS -Accessible routes/Ramps	1460	148	\$115,000.00		0	0	
	TOTAL			\$1,710,000.00		0	0	

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
² To be completed for the Performance and Evaluation Report.

PHA Name: WEST PALM BEACH HOUSING AUTHORITY

Reasons for Revised Target Dates ¹

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part III: Implementation Schedule for Capital Fund Financing Program					
PHA Name: WEST PALM BEACH HOUSING AUTHORITY					Federal FFY of Grant: 2009
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)		All Funds Expended (Quarter Ending Date)		Reasons for Revised Target Dates ¹
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

THE WEST PALM BEACH HOUSING AUTHORITY
VIOLENCE AGAINST WOMEN'S ACT (VAWA)

It is the goal of the WPBHA to provide for the health and safety of all residents and to act quickly to respond to all acts of violence occurring within our developments and in accordance with the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162). The WPBHA has the following goals in responding to domestic violence and violence against women.

Goals and Objectives

- A. Maintaining compliance with all applicable legal requirements imposed by VAWA
- B. Ensuring the physical safety of victims of actual or threatened domestic violence, dating violence, or stalking who are assisted by the WPBHA;
- C. Providing and maintaining housing opportunities for victims of domestic violence dating violence, or stalking;
- D. Creating and maintaining collaborative arrangements between the WPBHA, law enforcement authorities, victim service providers, and others to promote the safety and well-being of individuals assisted by the WPBHA who are victims of actual and threatened domestic violence, dating violence and stalking; and
- E. Taking appropriate action in response to an incident or incidents of domestic violence, dating violence, or stalking, affecting individuals assisted by the WPBHA.

WPBHA Programs and Activities

The WPBHA currently has a Memorandum of Understanding (MOU) with the Florida Resource Center for Women and Children (FRCWC), an agency that serves as an advocate for victims of domestic violence as well as provides anti-violence education and supportive services. The FRCWC in turn has ongoing partnerships with agencies such as the Legal Aid Society of Palm Beach County, Inc. and The Center for Information and Crisis Services that offer free assistance for individuals experiencing domestic violence related issues.

WPBHA Policies

The WPBHA Public Housing Admissions and Occupancy Policy (ACOP) includes the

following to provide for the protection of victims of domestic violence:

TERMINATING THE ASSISTANCE OF DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING VICTIMS AND PERPETRATORS

The Violence Against Women Reauthorization Act of 2005 (VAWA) provides that “criminal activity directly relating to domestic violence, dating violence, or stalking, engaged in by a member of a tenant’s household or any guest or other person under the tenant’s control shall not be a cause for termination of assistance, tenancy, or occupancy rights if the tenant or an immediate member of the tenant’s family is the victim or threatened victim of that domestic violence, dating violence, or stalking.”

VAWA also gives the WPBHA authority to “terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.”

VAWA does not limit the authority of the WPBHA to terminate the assistance of any participant if the WPBHA can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant is not evicted or terminated from assistance.”

The WPBHA Section 8 HCV Administrative Plan includes the following to provide for the protection of victims of domestic violence:

PROHIBITION AGAINST DENIAL OF ASSISTANCE TO VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING [24 CFR Part 5, Subpart L]

The Violence against Women Reauthorization Act of 2005 (VAWA) prohibits denial of admission to an otherwise qualified applicant on the basis that the applicant is or has been a victim of domestic violence, dating violence, or stalking. Specifically, Section 606(4) (A) of VAWA adds the following provision to Section 8 of the U.S. Housing Act of 1937, which lists contract provisions and requirements for the Housing Choice Voucher Program:

That an applicant or participant is or has been a victim of domestic violence, dating violence, or stalking is not an appropriate reason for denial of program assistance or for denial of admission, if the applicant otherwise qualifies for assistance or admission.

Notification

WPBHA Policy

The WPBHA acknowledges that a victim of domestic violence, dating violence, or stalking may have an unfavorable history (e.g., a poor credit history, a record of previous damage to an apartment, a prior arrest record) that would warrant denial under the WPBHA's policies. Therefore, if the WPBHA makes a determination to deny admission to an applicant family, the WPBHA will include in its notice of denial:

- A statement of the protection against denial provided by VAWA
- A description of WPBHA confidentiality requirements
- A request that an applicant wishing to claim this protection submit to the WPBHA documentation meeting the specifications below with her or his request for an informal review

Documentation

Victim Documentation

WPBHA Policy

An applicant claiming that the cause of an unfavorable history is that a member of the applicant family is or has been a victim of domestic violence, dating violence, or stalking must provide documentation (1) demonstrating the connection between the abuse and the unfavorable history and (2) naming the perpetrator of the abuse. The documentation may consist of any of the following:

- A statement signed by the victim certifying that the information provided is true and correct and that it describes bona fide incident(s) of actual or threatened domestic violence, dating violence, or stalking
- A police or court record documenting the domestic violence, dating violence, or stalking
- Documentation signed by a person who has assisted the victim in addressing domestic violence, dating violence, or stalking, or the effects of such abuse. This person may be an employee, agent, or volunteer of a victim service provider; an attorney; or a medical or other knowledgeable professional. The person signing the documentation must attest under penalty of perjury to the person's belief that the incidents in question are bona fide incidents of abuse. The victim must also sign the documentation.

Perpetrator Documentation

WPBHA Policy

If the perpetrator of the abuse is a member of the applicant family, the applicant must provide additional documentation consisting of one of the following:

- A signed statement (1) requesting that the perpetrator be removed from the application and (2) certifying that the perpetrator will not be permitted to visit or to stay as a guest in the assisted unit

- Documentation that the perpetrator has successfully completed, or is successfully undergoing, rehabilitation or treatment. The documentation must be signed by an employee or agent of a domestic violence service provider or by a medical or other knowledgeable professional from whom the perpetrator has sought or is receiving assistance in addressing the abuse. The signer must attest under penalty of perjury to his or her belief that the rehabilitation was successfully completed or is progressing successfully. The victim and perpetrator must also sign or attest to the documentation.

Time Frame for Submitting Documentation

WPBHA Policy

The applicant must submit the required documentation with her or his request for an informal review, or must request an extension in writing at that time. If the applicant so requests, the WPBHA will grant an extension of 10 business days, and will postpone scheduling the applicant's informal review until after it has received the documentation or the extension period has elapsed. If after reviewing the documentation provided by the applicant the WPBHA determines that the family is eligible for assistance, no informal review will be scheduled and the WPBHA will proceed with admission of the applicant family.

PHA Confidentiality Requirements [24 CFR 5.2007(a)(1)(v)]

All information provided to the WPBHA regarding domestic violence, dating violence, or stalking, including the fact that an individual is a victim of such violence or stalking, must be retained in confidence and may neither be entered into any shared database nor provided to any related entity, except to the extent that the disclosure (a) is requested or consented to by the individual in writing, (b) is required for use in an eviction proceeding, or (c) is otherwise required by applicable law.

WPBHA Policy

If disclosure is required for use in an eviction proceeding or is otherwise required by applicable law, the WPBHA will inform the victim before disclosure occurs so that safety risks can be identified and addressed.